



STATE OF WASHINGTON
APPLICATION FOR CHANGE/TRANSFER
OF WATER RIGHT

RECEIVED

OCT 03 2008

DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.)

- Change purpose(s) of use
- Add purpose(s) of use
- Change point(s) of diversion/withdrawal
- Add point(s) of diversion/withdrawal
- Change/transfer place of use
- Other (i.e. consolidation, intertie, trust water)

Explain: _____

\$50 fee OK-EG 10-16-08
FOR OFFICE USE ONLY
 CHANGE No. CS4-02398CTCL-42 WRIA 37
 DATE ACCEPTED 04/06/02 BY [Signature]
 FEE \$ 200 REC'D 10/03/2008
 CHECK No. _____
 ECY Coding: 001-002-WR10285-000011
 SEPA: Exempt Not exempt

IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)

1. Applicant Information:

APPLICANT/BUSINESS NAME <i>Richard & Helen Skagen</i>	PHONE NO. <i>() 965-5287</i>	FAX NO. <i>()</i>
ADDRESS <i>6510 W Columbus St</i>		
CITY <i>YAKIMA</i>	STATE <i>WA</i>	ZIP CODE <i>98903-9586</i>

CONTACT NAME (IF DIFFERENT FROM ABOVE) <i>GEORGE MARSHALL</i>	PHONE NO. <i>() 2490226</i>	FAX NO. <i>() 2490233</i>
ADDRESS <i>P.O. Box 567</i>		
CITY <i>YAKIMA</i>	STATE <i>WA</i>	ZIP CODE <i>98907-0567</i>

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER <i>Aquavella 2398 Answer 178</i>	RECORDED NAME(S)
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

See Attachment

42
WRD ID: 4614854
CS4-02398CTCL @ 42

<i>CTL 02398</i> <i>SB 23 ANNUM</i>			
FOR OFFICE USE ONLY			
APP. NO. <i>06-30-1872</i>	PERMIT NO.	CERT. NO.	CERT. OF CHANGE NO.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Bachelor Creek	1	SW	SW	5	12	18		—

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Bachelor		NW	SE	5	12	18	42411	—

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?
 EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	0.03	5.28	April 15 - July 10

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
SAME			

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:
 Lot E-4 of Short Plat 85-167 being within the NW¼ SE ¼ of Section 5 T. 12 N., R. 18 E. W.M. (Parcel # 181205-42411)

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES NO - IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:
 SAME

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO - IF NO, PROVIDE OWNER(S) NAME:

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

